COMMUNICABLE DISEASES: Madison County

Health Department

Disease Surveillance & Risk Report

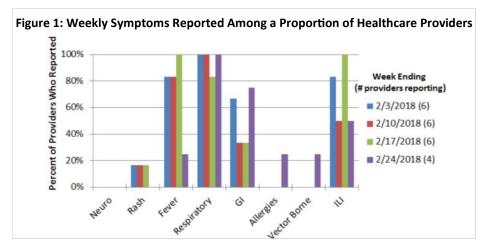
View all reports online at www.healthymadisoncounty.org

Madison County Communicable Disease Activity: Week 8, ending 2/24/18

*Information denoted with an asterisk is subjective and provided on a voluntary basis.

Communicable Diseases Reported to the Health Department: 1 Chlamydia

Primary Care Providers Reported*: Fever, respiratory illness, gastrointestinal illness (GI), upper respiratory illness (URI), influenza-like illness (ILI), flu, sore throats, sinus infections, allergies, coughs, and ticks (Figure 1).



Hospitals
Reported:
Fever, respiratory
illness, GI, ILI, flu, and
URI

College Health Centers Reported*: Rashes, fever, respiratory illness, GI, ILI, flu, strep throat, and URI

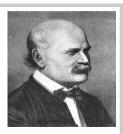
Syndromic Surveillance in Emergency Department—2/17/18 to 2/24/18: No clusters of illness reported

Medicaid Over-the-Counter (OTC) & Script Medication Alerts—2/2/18 to 2/11/18: Mild/moderate sensitivity antacids



Issue Highlight: The Science Behind Handwashing

Ignaz Semmelweis is often credited with being the father of hand hygiene and was known as an early pioneer of antiseptic procedures. By instituting good handwashing with disinfectants, Dr. Semmelweis was able to reduce the mortality rate of puerperal fever (child birth fever) in a maternity wing from 16% to less than 3%. Good hand hygiene holds true today. Thorough and frequent handwashing is and integral part of keeping healthy.



How can washing your hands keep you healthy?

Studies have shown that handwashing can prevent 1 in 3 diarrhea-related sicknesses and 1 in 5 respiratory infections, such as a cold or the flu.

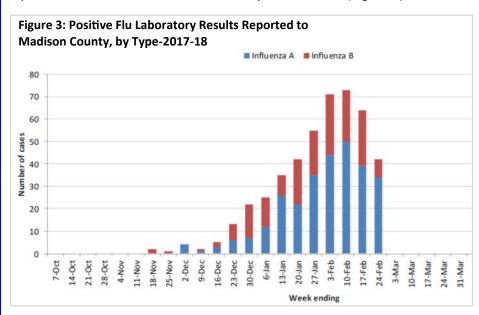
More detailed information and the science behind handwashing can be accessed at: https://www.cdc.gov/handwashing/index.html

Madison County Disease Surveillance & Risk Report

Madison County Flu Activity: Week 8, ending 2/24/18: Widespread (remains elevated)



Weekly Lab-confirmed flu: 42 cases (34 flu Type A and 8 flu Type B) were reported; this is a 34% decrease from the previous week (Figure 3).



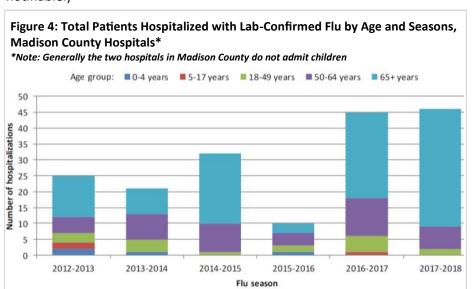
Schools Districts*: No report due to winter break.

College Health Centers*: ILI and flu was reported

Primary Care Providers*: ILI and flu was reported

Flu-Associated Pediatric Deaths: No reports this season to date.

(Flu-associated deaths only in children younger than 18 years old are nationally notifiable.)



Influenza-like or flu-like illness (ILI) includes:
1) a fever greater than 100°F measured with a thermometer AND
(2) a cough AND/OR sore throat in the absence of a known cause other than influenza.

Total Lab Confirmed Flu Reported to Date:

456 (283 Flu Type A-62% & 173 Type B-38%), this is 178% higher than average (164), to date.



Incidence Rate (the number of new flu cases): 57.2 per 100,000 population

Hospitals:

ILI and flu reported



Flu-Related Hospitalizations: 5

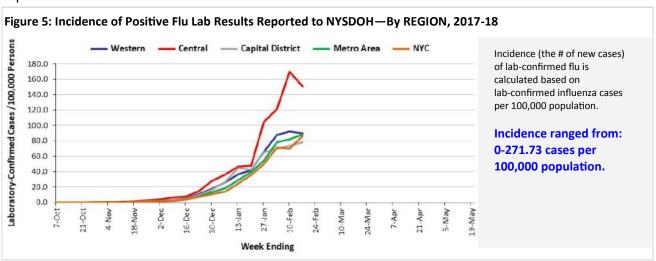
hospitalized patient with lab-confirmed flu were reported in Madison County; this is an decrease from the previous week (4). A total of 51 hospitalizations have been reported this season to date (Fig. 4).

Madison County Disease Surveillance & Risk Report

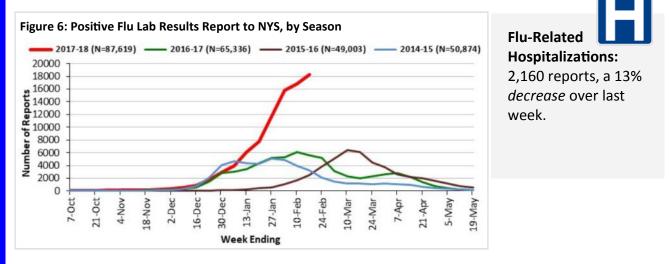
New York State Flu Activity: Week 7, ending 2/17/18: Widespread (remains elevated)

No Report No Activity Sporadic Local Regional Widespread

Weekly Lab-Confirmed Flu: 18.258 reports, a 9% *increase* over last week (Figure 5). Flu was reported in 61 counties.



ILInet Healthcare Providers: 10.66% of weekly patient complaints were flu-like illness (ILI); this a *slight decrease* from the previous week and is *above* the regional baseline of 3.10% (Figure 6). (ILInet providers report the total number of patients seen and the total number of those with complaints of influenza-like illness (ILI) weekly in an outpatient setting.)



Flu-Associated Pediatric Deaths: No reports this week. Five deaths were reported this season todate.

Madison County Disease Surveillance & Risk Report

National Flu Activity: Week 7, ending 2/17/18: Widespread (remains elevated)

No Report No Activity Sporadic Local Regional Widespread

Flu activity remained elevated in the U.S.

Geographic Flu Activity Summary (Figure 7):

(Geographic spread of influenza viruses, not a measure of severity.)

- Widespread influenza activity was reported by Puerto Rico and 48 states
- Local influenza activity was reported by the District of Columbia, Guam and two states
- No influenza activity was reported by the U.S. Virgin Islands.

Flu Activity from ILINet Data (Figure 8):

New York City, the District of Columbia, Puerto Rico and 39 states experienced high activity; five states experienced moderate ILI activity; three

states experienced low ILI activity; and three states experienced minimal ILI activity. (This data is based on the percent of outpatient visits in a state due to ILI compared to the average percent of ILI visits during weeks with little or no influenza virus circulation.)

U.S. ILInet Healthcare Providers:

Outpatient illness visits reported through the Network was 6.4%, this percentage is *above* the national baseline of 2.2% but a decrease from the previous week. All 10 regions in the

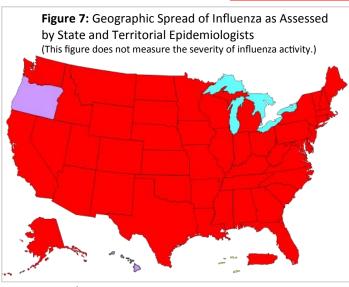
U.S. reported flu-like illness *at or above* their region-specific baselines.

Flu and Pneumonia-Associated Deaths:

9.5% of all deaths reported through the National Center for Health Statistics mortality surveillance data, occurring during week 5 ending 2/3, were attributed to pneumonia and flu; this is *above* the week 5 epidemic threshold of 7.4%.

Flu-Associated Pediatric Deaths:

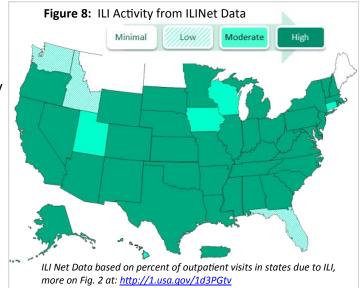
13 pediatric deaths were reported during week 7. 97 flu-associated pediatric deaths have been reported this season to date.



Overall Flu-Related

Hospitalization Rate: 74.5 per 100,000 population.

The highest rate of hospitalization was among adults aged ≥65 years (322.7 per 100,000 population).



Sources: FluView: Weekly U.S. Influenza and Surveillance Report. Centers for Disease Control and Prevention. http://l.usa.gov/leDDFhh